



**SAN BERNARDINO COUNTY
2011 POINT-IN-TIME
HOMELESS COUNT & SURVEY REPORT**



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Department of Behavioral Health



I. EXECUTIVE SUMMARY

The definition of homelessness provided by the United States Department of Housing and Urban Development (HUD) determined the persons to be enumerated in this study as: “people who for various reasons have found it necessary to live in emergency shelters or transitional housing for some period of time,” and “... unsheltered homeless people who sleep in places not meant for human habitation (for example, streets, parks, abandoned buildings, and subway tunnels) and who may also use shelters on an intermittent basis.”

The 2011 Point-In-Time Homeless Count resulted in a total of **2,876 persons**. This number was calculated based upon direct observations and recognized statistical projection methods which HUD deems appropriate for this research process.

The count consists of three subtotals:

- The number of projected unsheltered homeless is **1,692 persons**;
- The number of sheltered homeless (those in emergency shelter or transitional housing) is **1,039 persons**; and
- The number of **hotel/motel vouchers** issued to homeless persons or families and used on the night of the count is 145.

The 2011 Point-in-Time Count employed a rigorous methodology that produced a conservative count. It does not, nor was it intended to, convey the total number of persons experiencing homelessness in San Bernardino County throughout the year in 2011. The method employed in this study is likely to have resulted in an undercount. Homeless persons not physically observed were not counted.

Of the sheltered homeless persons observed on the night of the count:

- One hundred fifty-six (15%) are males under the age of 18;
- One hundred ninety (18%) are females under the age of 18;
- Three hundred twenty-eight (32%) are adult males;
- Three hundred sixty-four (35%) are adult females;
- Three hundred sixty-four households are represented among the 1,039 persons counted in a shelter on the night of the count;
- The majority of these households (65%) do not contain children, while 35% do;
- No unaccompanied minors were present in shelters on the night of the count.

Of the unsheltered homeless persons observed on the night of the count:

- Twenty-nine (1.7%) are males under the age of 18;
- One hundred fifty-five (9.1%) are females under the age of 18;
- One thousand, three hundred six are (77.2%) are adult males;
- Two hundred and two (11%) are adult females;
- One thousand, twenty-nine households are represented among the 1,692 persons counted in a shelter on the night of the count;
- Nine in ten of these households (91.0%) do not contain children, while 10% do;
- Three unaccompanied minors were present in shelters on the night of the count.

Thus, unsheltered homeless persons are more likely to be homeless and live in households without children compared to those staying in a shelter. Proportionally fewer homeless children are present at unsheltered locations than at shelters.

As depicted in **Table A**, a greater proportion of unsheltered homeless individuals suffer from severe mental illness or substance abuse

issues than sheltered homeless. Furthermore, unsheltered homeless persons are more likely to be chronically homeless as defined by HUD and to have served in the United States military. Table A also demonstrates that the most pressing problems experienced by homeless persons are domestic violence, substance abuse and severe mental illness.

Table A. Chronically Homeless and Other Subpopulations

	Sheltered Count (%)	Unsheltered Count (%)	Total Count (%)
Chronically Homeless Individuals	47 (4.2)	122 (7.2)	169 (6.0)
Households	13 (3.6)	58 (7.7)	71 (5.1)
Veterans	68 (6.0)	166 (9.8)	234 (8.3)
Severely Mentally Ill	61 (5.4)	143 (12.7)	204 (7.2)
Chronic Substance Abuse	118 (10.5)	257 (15.2)	375 (13.3)
Persons With HIV/AIDS	7 (.006)	18 (.01)	25 (.008)
Victims of Domestic Violence	175 (15.6)	282 (16.6)	457
Number of Adults and Children	0 (0.0)	3 (.001)	3 (.001)

II. INTRODUCTION

A. FEDERAL DEFINITION OF HOMELESSNESS

The purpose of the Point-In-Time Count process is to establish a snapshot of a community's chronically homeless population. HUD defines the chronically homeless as an unaccompanied homeless individual or family with a disabling condition who has either been continuously homeless for a year or more or has had at least four episodes of homelessness in the past three years. In defining chronically homeless, the term "homeless" means "a person sleeping in a place not meant for human habitation (e.g. living on the streets) or in an emergency shelter." HUD defines "disabling condition" as "a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions."

This definition of homelessness makes the final count numbers necessarily limited to a potentially small subset of the total homeless population. Most service providers agree that the definition used by HUD for this process is quite conservative, primarily focusing on chronically homeless individuals and families, or those that have sought assistance with a shelter provider.

This narrow focus leaves out other at-risk or precariously housed populations, such as:

- Those that are long-term residents of motels/hotels;
- Those that are "doubled-up" in informal living arrangements with friends or family members; and
- Those that are temporarily sheltered in hospitals, jails, or rehabilitation facilities.

In addition to these specific populations that could not be included in this process, because of their attempts to hide from others in efforts to protect themselves, field teams undoubtedly

failed to observe homeless persons in highly inaccessible areas, such as forested and desert areas, abandoned buildings, and other areas that were perceived to be inaccessible or unsafe. In spite of these practical limitations, every effort was made to count all observable homeless, and not to count any homeless person or persons more than once.

B. THE SAN BERNARDINO COUNTY CONTINUUM OF CARE

The Continuum of Care (CoC) in San Bernardino County is an example of the community model of homeless care promoted by the United States Department of Housing and Urban Development (HUD) since 1994. A CoC system is designed to address the critical problem of homelessness through a coordinated, community-based process of system-building to address identified needs. The approach is predicated on the understanding that homelessness is not caused merely by a lack of shelter, but involves a variety of underlying, unmet needs - physical, economic, and social. These underlying causes can be related both to the individual and larger systemic factors, such as lack of affordable housing. San Bernardino County is one of approximately 400 CoCs nationally. HUD is the primary source for homeless services funding in most CoC areas. The CoC in San Bernardino County is supported by the Office of Homeless Services, a subdivision of the Human Services Department, Department of Behavioral Health.

The Office of Homeless Service (OHS) was created in September 2007 by the San Bernardino County Board of Supervisors. OHS works to develop a countywide public and private partnership that coordinates services designed to reduce and prevent homelessness. OHS strives to end homelessness in San Bernardino County by providing comprehensive services and resources for homeless persons, and increasing permanent supportive housing opportunities for very low income and long-term homeless persons. The Office of

Homeless Services carries out this directive by developing and implementing a countywide 10-Year Strategy to End Homelessness through advocacy, policy review, technical assistance, priority setting, linkages and coordination, provision of financial and other resources, and articulation of the vision of the San Bernardino County Homeless Partnership.

The enumeration of homeless persons in San Bernardino County has been conducted by the Office of Homeless Services since 2007.

Such a count became a prerequisite to applying for Homeless Assistance Funding from HUD in 2005. HUD provides the methodological and procedural guidelines for enumerating the homeless in a document entitled, A Guide to Counting Unsheltered Homeless People (Second Revision, January, 2008). Similar levels of scientific rigor and adherence in the 2009 and 2011 Point-In-Time process produced counts that are comparable across years.

III. HOMELESS COUNT AND SURVEY METHODOLOGY

A. OVERVIEW OF PLANNING PROCESS Community Outreach and Volunteer Recruitment

One of the most critical steps in planning any homeless count process is engaging the many different groups of stakeholders, particularly those who are “front line responders,” or those who regularly interact with the homeless in the course of their work. The first group engaged in this process was the government agencies that provided direct and indirect assistance to the process. These agencies included: county and city law enforcement and various city departments (parks and recreation, code enforcement, and community services). The mayors and city managers of all jurisdictions within the county were informed of the intent of the Point-In-Time process and the timeline of activity. All of these agencies helped identify “hot spots,” or outdoor locations where homeless persons were known to congregate, and recruit volunteers. City staff from many different departments often assists the homeless in some fashion on a daily basis. These staff members are most likely to have both valuable information about outdoor congregating locations as well as an interest in making the overall process successful.

Another key step in any homeless count planning effort is to establish contact with

shelter and other health, human and social service providers. These providers, like certain city and county staff, also have daily contact with the population being studied. In addition, many service providers and their staff are the first to begin outreach to the homeless to convey the importance of the Point-In-Time process. Contact with shelter and homeless service providers in San Bernardino County began in the fall of 2010. In addition to extending an opportunity to provide input into the planning process and encouraging them to inform their clients when the homeless count would be conducted, providers were also asked to assist with identifying hot spots. As described later in this report, identification of these hot spot locations was critical to the selection of the geographic areas where field teams of volunteer enumerators would be sent.

Recruiting volunteer enumerators and surveyors was the next significant focus of the community outreach efforts. Through a variety of means, dedicated County staff began outreach efforts to many different types of organizations in the fall of 2010. The volunteer coordination team communicated with and conducted on-site presentations with: homeless service providers, high school and college service learning groups, churches and other faith based organizations, and volunteer networks such as 2-1-1. Given the ambitious goal of canvassing approximately 200

geographic areas across the entire county, within a four hour time frame on two evenings, the planning team predicted that several hundred volunteers would be needed.

In addition to the homeless count, a simultaneous survey process was also planned in order to acquire more robust information about the homeless population. Researchers have found that incentive items (such as toiletries, gift cards and food items) can be useful in encouraging cooperation of homeless individuals, particularly because the surveys ask for sensitive personal information. All survey data are kept confidential. No individual person's identity is connected to any survey.

B. STREET COUNT METHOD

Even excluding much of its desert and mountainous terrain, canvassing the entire county with a limited pool of volunteers in two nights is not practical. Consequently, rather than a census approach (canvassing every square inch of the entire county) a sampling strategy was devised for the 2011 Point-In-Time Count. This strategy was based upon the methodology used in New York City's 2003 Manhattan Point-In-Time Count, later revised in 2004.¹ The 2009 San Bernardino Point-In-Time Count also employed this method. As previously noted, this sampling method requires the identification of areas where homeless persons are known to congregate, otherwise known as hot spots.

The San Bernardino County Office of Homeless Services (OHS) identified 439 individual hot spots, or outdoor congregating areas where homeless persons had been observed in the months preceding the count. These locations were geocoded by the County's Information Services Department, Geographic Information Systems unit (ISD-GIS) and found to be contained in 307 (29.8%) of the county's 1,027 eligible block groups. Seventy-two block groups (6.6%) were excluded from the

1,099 U.S. Census-defined block groups in San Bernardino County because they either encompassed military installations, desert tracts with zero population, or mountain areas unable to be canvassed on the night of the count due to anticipated road closures.² Of the block groups determined to contain hot-spots, 249 (81.1%) contained one hot spot and 58 (18.9%) between two and fourteen hot spots.

OHS staff obtained estimated counts of homeless persons for 242(78.8%) of the 307 block groups containing one or more hot spots. These estimated counts were generated using the data provided by city staff, local service providers, and representatives from local law enforcement, and the parks and recreation department, as well as other individuals or groups familiar with the location of homeless persons. These estimates ranged from one to forty homeless persons with a mean of 5.27 and a median (the point above which and below which half the values fall) of 3.00. The estimated counts obtained summed to 1,285 homeless persons.

In the context of developing a sampling design, the 65 hot spots lacking estimated counts of homeless persons were assigned "imputed" counts. Several approaches might have been taken here. To be conservative, a count of "1" might have been arbitrarily assigned to these hot spots, but because some of them were described as multiple encampments, significantly more homeless persons than that may have been found in these spots. If the decision was made to classify block groups with hot spots into multiple "Density" levels, the within-stratum variance would have been high. This would not have biased sample selection, but may have made it less statistically efficient by elevating sampling variance.

Consequently, contextual information such as the estimated counts in proximate locations and/or similar settings was utilized to replace missing values for estimated counts in 65 cases. These "imputed estimates" improved

1 "Guide to Counting Unsheltered Homeless People: Second Revision," Office of Community Planning and Development, U.S. Department of Housing and Urban Development, January 15, 2008, pgs. 113-115.

2 A U.S. Census block group is a geographic unit that typically encompasses a population of between 600 to 3,000 residents, with an optimum of 1,500 persons.

the likelihood that the respective block groups would be classified into the proper density strata. The imputed estimates would not bias sample selection and most likely would have made it more efficient by reducing within-stratum variance. Accordingly, the actual Point-In-Time Count, which resulted from teams carefully canvassing the block groups selected into the final sample, would have been more precise.

With the 65 estimated-count missing values replaced by imputed estimates, the sum of homeless persons increased to 1,667 distributed across 307 block groups in San Bernardino County. Accumulating the hot spot estimated and imputed counts, the average number of homeless persons across all 307 block groups containing one or more hot spots was 5.00, the median was 4.00, and the mode (most frequent value) was 2.0. Emulating the 2003 New York sampling design, the 307 block groups containing hot spots were categorized as High or Medium density. Those classified as Medium Density contained between one and four homeless persons, while those classified as High Density contained five or more. In total, 106 (10.3%) block groups were assigned as High Density, 203 (19.7%) as Medium Density, and finally the remaining 718 (70.0%) as Low Density block groups.

On the night of the count, field teams visited every High Density area and a statistically valid sample of Low and Medium density areas. The purpose of selecting a sample of these geographic areas was to limit the number of areas enumerators had to cover while allowing the data collected on the night of the count to be extrapolated to the larger geographic area.

Sample Selection

All block groups in the High Density stratum were selected with certainty. In the Medium Density block groups, the goal was to be 90% confident that the weighted sample count was within 10% of the actual number of unsheltered homeless persons in these areas. A confidence interval of plus or minus ten percent is the target suggested by the Manhattan sampling strategy approved by HUD. This refers to the level of precision required of estimates of an entire study

area that are based upon sample data. When a confidence interval is specified we can be 90% confident that the true population parameter lies within an interval extending that percentage above and below any proportion derived from sample data. A population parameter is the result one would obtain if every sampling unit in the Medium Density stratum was canvassed. Sampling units in the Medium Density stratum were sorted by acreage, low to high, and a random selection of 45 sampling units was obtained using Systematic Random Sampling (sometimes called “interval sampling”).

As the proportion of some attribute in the sample (e.g. sampling units in which homeless persons are observed) approaches a fifty/ fifty split, sampling error increases, resulting in a wider confidence interval. Conversely, sampling error decreases as the proportion of a given attribute approaches a five/ ninety-five split, (e.g. homeless persons are observed in 5% of the sampling units and not in 95%) resulting in a more precise estimate and a narrower confidence interval. Homeless persons were observed in seventeen of the 45 canvassed Medium Density stratum sampling units, fixing this proportion at .377/ .623. The sample of 45 selected from a population of 203 results in a confidence interval of plus or minus 10.0%, using a confidence level of 90%.

This sampling strategy produced a weighted, estimated count with a formula:

$$\text{Count} = N_i * K_i$$

where N_i is the Count for the i^{th} Block group; and $K_i = (203/45)$ if the i^{th} Block group is from the Medium Density stratum, and $K_i = 1$ otherwise.

Low Density areas were assigned a less exacting standard because of resource limitations and because OHS did not anticipate finding as many individuals in these areas. In Low Density areas, OHS’s goal was to be 80% confident that the weighted sample was within 10% of the actual number of homeless persons in these areas. Sampling units in the Low Density stratum were sorted by acreage, low to high, and a random selection of 23 sampling

units was obtained using Systematic Random Sampling. Homeless persons were observed in five of the 23 canvassed Low Density stratum sampling units, fixing this proportion at .217/ .783. The sample of 23 selected from a population of 918 results in a confidence interval of plus or minus 10.0%, using a confidence level of 80%.

This sampling strategy produced a weighted, estimated count with a formula:

$$\text{Count} = N_i * K_i$$

where N_i is the Count for the i^{th} Block group; and $K_i = (918/23)$ if the i^{th} Block group is from the Low Density stratum, and $K_i = 1$ otherwise.

Sampling from all three strata combined resulted in 174 individual block groups being sampled. Due to resource constraints, six of the 106 selected with certainty were not canvassed on the night of the count. This diminished the total of block groups canvassed from 174 to 168.

Description of Enumeration Process

Prior to participating in the street count, all volunteers attended a mandatory 90 minute training session. This training session discussed count and survey protocols and safety procedures. Volunteers received instruction on: the importance of accurate data collection, use of the count and survey forms, team member roles, tips for how to canvass a block group, and how to maintain safety for the volunteers while also respecting the privacy and safety of homeless individuals. With respect to canvassing methods, volunteers were instructed to avoid entering abandoned buildings, unless there was a homeless “lookout” or other resident that could provide intelligence about homeless people in the area. Volunteers were asked to canvass agricultural fields, parks, wooded areas, and similar locations, as long as this could be accomplished safely. Volunteers were given the discretion to determine whether particular locations were safe to enter or canvass.

On the night of the Point-In-Time Count volunteers assembled at 12 pre-determined deployment centers staffed by County volunteers. Participants were organized into teams of two or more people, and were given a field bag that included: block group maps, tally sheets and survey forms, bags of incentive items, flashlights, clipboards, and pens. Every volunteer with a cell phone was asked to have it with them, and to leave their phone number with the deployment center staff. County volunteers provided a brief refresher training before deploying teams into the field. Each team was contacted approximately every 90 minutes by their deployment centers to report on their progress and to see if they needed any additional supplies.

Volunteers were instructed to use the tally sheet to record observed homeless individuals. A separate tally sheet was used for each of the 106 block groups sampled. On the tally sheet volunteers were instructed to provide a tally count of the number of homeless persons physically observed on the night of the count in each of four categories: male youth, male adults, female youth, and female adults. No effort was made to estimate the number of households witnessed on the night of the count due to the difficulty determining, by physical observation alone, whether a group of individuals constitute a household unit. To do so would introduce a level of error into the count, therefore survey data were used to estimate the number of households observed on the night of the count.

During previous homeless counts, volunteers noted the presence of recreational vehicles or campers, sport utility vehicles or vans, and passenger cars in which field teams suspected that persons were sleeping. Similarly, notes indicating the presence of tents or campsites that volunteers suspected were occupied were also common. However, because volunteers were trained to preserve the privacy of the homeless by refraining from knocking on vehicle windows or doors there was no way to determine whether these vehicles or encampments were occupied by homeless persons. In order to quantify the number of such vehicles and encampments encountered during the 2011 homeless count, an item on the tally sheet instructed volunteers to provide a tally count of the number of vehicles. However,

HUD explicitly prohibits using, “unscientific ‘adjustment factors’ to derive...counts of the unsheltered population...to account for people not seen during the point-in-time count.”³ Consequently, this information has not been used to augment the San Bernardino Point-In-Time Count.

Approximately 350 volunteers were ultimately dispatched in field teams for the Point-In-Time Count on the evenings of Wednesday, January 26th and Thursday, January 27th, 2011 between the hours of 9:00 p.m. and 1:00 a.m. Depending upon the geographic areas to which teams were assigned, some teams only canvassed one area, while others volunteered to canvass two or three contiguous areas (typically those in larger desert or rural areas).

C. SHELTER COUNT METHOD

Enumerating sheltered homeless persons is a relatively straightforward activity.

HUD defines sheltered homeless persons as adults, children, and unaccompanied youth who, on the night of the count, are living in shelters for the homeless, including:

- Emergency shelters;
- Transitional housing;
- Domestic violence shelters;
- Residential programs for runaway/homeless youth; and
- Any hotel, motel, or apartment that accepts voucher arrangements paid by a public or private agency because the person or family is homeless. This does not include those living in permanent housing supported by a HUD Housing Choice Voucher (also known as Section 8 vouchers).

HUD further advises that the following types of people should not be counted as part of the sheltered population:

- Persons living doubled up in conventional housing;
- Persons living in a hotel or motel, the cost of which is not subsidized by a voucher arrangement;
- Formerly homeless persons living in Single Room Occupancy housing units subsidized by federal housing vouchers, Shelter Plus Care, Supportive Housing Program permanent housing or other permanent housing units;
- Children or youth, who because of their own or a parent’s homelessness or abandonment now reside temporarily or for a short anticipated duration in hospitals, residential treatment facilities, emergency foster care, or detention facilities;
- Adults in mental health facilities, chemical dependency facilities, or criminal justice facilities.⁴

The process of determining where to find sheltered homeless in San Bernardino County was made relatively simple by the use of existing contact lists of known emergency and transitional shelter programs provided by OHS. The shelter staff on duty the night of the Point-In-Time Count were provided with a copy of the shelter tally sheet and briefed in the days prior to the count on how to appropriately complete the form. The tally sheet used by the shelter staff is substantially similar to the form used by field teams counting the unsheltered homeless. The primary difference is the addition of a box that asks for the number of hotel/motel vouchers provided that night, if any.

No jails, hospitals or similar institutions were

3 “Guide to Counting Unsheltered Homeless People: Second Revision,” Office of Community Planning and Development, U.S. Department of Housing and Urban Development, January 15, 2008, pgs. 12-13.

4 “A Guide to Counting Sheltered Homeless People *Revised*” U.S. Department of Housing and Urban Development, Office of Community Planning and Development; January 15th, 2008.

included in the process because homeless people in these institutions do not meet HUD's criterion for the definition of being chronically homeless.

D. HOMELESS SURVEY METHOD

The 2011 San Bernardino Point-In-Time Count of the Homeless also included a survey component. Surveys were administered to a sub-sample of sheltered and unsheltered homeless persons on the night of the count and in the weeks shortly thereafter. The survey utilized in the 2011 Point-In-Time Count, was developed in collaboration with OHS, CLA & Associates, and the California State University, Fullerton Social Science Research Center to be responsive to specific HUD requirements, meet the programmatic needs of OHS, and to be consistent with the 2009 survey. In order to maximize the integrity of the data collected, efforts were made in 2011 to cut the length of time required to administer the 2011 survey. As a result, some items present in the 2009 survey were omitted. The final survey instrument contained 20 items. With one exception, the same survey instrument was utilized with both sheltered and unsheltered populations. The unsheltered version of the survey instrument also contained three screener questions to determine that the potential respondent was, in fact, chronically homeless.

On the night of the count, a sub-sample of observed homeless persons was approached for interview. Due to the limited timeframe in

which to conduct both the count and administer surveys, the number of homeless persons approached for the survey depended on the size of the respective count within each block group. For groups of up to three homeless persons, volunteers were to attempt to survey all members of the group; in groups of four to eight persons, volunteers were to attempt to survey every other person; and in groups of nine or more persons, volunteers were to attempt to survey every third person.

Seventy-seven interviews with unsheltered homeless persons were completed on the night of the count. Another 188 surveys of unsheltered homeless were gathered by the staff of OHS in several outdoor service and congregating areas during the months of February and March, 2011, bringing the total number of surveys administered to unsheltered homeless individuals to 265.

Administration of surveys to sheltered homeless was coordinated through OHS. Some service providers, particularly those serving domestic violence victims, had their own staff proctor the survey with their clients. The remaining providers allowed OHS staff to personally proctor the survey with their clients. The process of gathering survey data from sheltered homeless persons also took place between the first week of February, 2011 and was completed by mid-April, 2011. Additionally, some shelter provider staff members, as well as the staff of OHS, were trained on the appropriate administration procedure for the sheltered homeless survey. In total, surveys were administered to 313 sheltered individuals.

E. OTHER HOMELESS POPULATION DATA SOURCES

The other primary data source submitted to federal agencies that attempts to enumerate a community's homeless population comes from school districts. Districts are required to report the number of homeless children attending their schools to their state Departments of Education, who then report the data to HUD.

The category of homeless children and youth includes individuals who lack a fixed, regular, and adequate nighttime residence. This includes children in the following circumstances:

- Children and youth who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason;
- Children who may be living in motels, hotels, trailer parks, shelters, or awaiting foster care placement;
- Children and youth who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings;
- Children and youth who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings, or
- Migratory children who qualify as homeless because they are children who are living in similar circumstances listed above.

The main difference between the data collected from school districts and that collected during the Point-In-Time Count is that the school

district data includes children living in motels, trailers and other environments that the Point-In-Time data cannot count because the residents are considered at-risk of homelessness, not literally homeless. This significant methodological difference between the two sets of data mean that the school district data include a large segment of the at-risk homeless. If one were to estimate the number of homeless in a community based on these children and the family members likely associated with them, these numbers are, by definition, far higher than the stringent criteria used during the HUD-mandated Point-In-Time Count process.

Accordingly, these data were not included in the analysis of the Point-In-Time Count data. However, the school district data can be referenced in Appendix F.

IV. HOMELESS COUNT CHALLENGES AND ASSUMPTIONS

A. CHALLENGES TO THE STREET AND SHELTER COUNTS

Research targeting a homeless population involves a number of challenges. Any homeless population – whether studied in its entirety, or in smaller subpopulation categories – is by its very nature highly mobile. Additionally, most homeless persons are disposed to hide themselves from public scrutiny through a variety of means and for many different reasons. The tendencies of this population to either intentionally hide from enumerators or to simply be difficult to find as they try to stay “under the radar” is a significant hindrance to a homeless count process.

Some of the reasons the homeless can be hard to enumerate include:

- Parents who hide their children for fear of having to turn their children over to Child Protective Services;
- Chronically homeless persons who may not seek services or government benefits;
- Persons who live in vehicles and must move every few days;
- Persons who overcrowd into homes, apartments and motel rooms above the acceptable occupancy levels;
- Homeless youth who tend to be less visible than homeless adults;
- And, homeless individuals and groups that camp in locations that are not easily accessible, such as riverbeds, under bridges, or in abandoned buildings.

In San Bernardino County in particular, another significant challenge to an accurate homeless count and survey process is the

geographic size of the county. Although the county’s total population in 2010 was 2.035 million,⁵ that population was spread across 20,052 square miles, much of which is largely uninhabited desert, farm or park land. This geographic spread presents a particular difficulty when trying to determine whether recreational and other large vehicles are housing homeless persons or leisure campers. These vast expanses of desert and park land attract many leisure campers throughout the year, and it can be difficult to distinguish them from homeless living in vehicles or encampments, unless they self-identify themselves to enumerators. Further, this has made providing homeless services across the county in a regionally coordinated way difficult to achieve, as many areas are simply too far from population centers to create an effective and economically viable service provision system. Unlike more densely populated urban counties, there are few service locations that see a large concentration of homeless, or are generally known by the local community to be a central service location for homeless persons.

B. CHALLENGES TO THE SURVEY PROCESS

Although any survey process is subject to difficulty, surveying any homeless population can be an especially challenging undertaking. The results of such a process are dependent upon the willingness of the participant to self-report accurately, which is a variable factor with any group of respondents. However, a further complication with surveying a homeless population in particular is the fact that some questions must ask about sensitive topics in order to acquire the information required by, in this case, the federal mandates of the process. While many respondents were very open about their circumstances, explaining that they saw it as a means of helping others, some respondents

5 U.S. Census Bureau, www.census.gov, accessed June 2011.

were understandably uncomfortable with providing in-depth information about their experiences.

Another challenge to the Point-In-Time survey process is the usually difficult circumstances under which the unsheltered

respondents must participate. This is particularly true for those that were observed the night of the count and were willing to complete a survey—most of those respondents participated in inclement weather, out-of-doors.

V. HOMELESS COUNT RESULTS

Observed Count

A total of 439 persons in four demographic categories were physically observed on the night of the street count in places not meant for human habitation; 361 in High Density block groups, 56 in Medium Density sampling units and 22 in Low Density sampling units. **Table 1** depicts the actual count and mean number of homeless persons observed on the nights of the 26th and 27th separately for each stratum. As

would be expected, a larger number of homeless persons were observed in the Medium and Low Density stratum. However, relative to the number of units sampled, 45 in the Medium and 23 in the Low Density stratum, little difference in the mean number of homeless persons counted were observed between the two strata. As would also be expected, the greatest proportion of homeless persons physically observed on the night of the count is adult males (361 out of 439, or 82.2%)

Table 1. Actual Count and Mean Number of Homeless Persons Observed

	Male Youth Count (Mean)	Female Youth Count (Mean)	Male Adult Count (Mean)	Female Adult Count (Mean)	Total Count (Mean)
Low Density	0 (0.0)	3 (.200)	17 (1.13)	2 (.133)	22 (1.46)
Medium Density	4 (.089)	0 (0.0)	47 (1.04)	5 (.111)	56 (1.12)
High Density	10 (.100)	10 (.100)	274 (2.71)	67 (.663)	361 (3.50)
Total	14	13	338	74	439

The count of unsheltered homeless persons in San Bernardino County in the Medium Density strata is computed by multiplying the mean number of persons observed (not the total, but the average number in each of the eight demographic categories) in the canvassed Medium Density sampling units by the number of Medium Density units not canvassed ($n=158$). For example, volunteer enumerators observed a total of 47 adult males in the 45 Medium Density sampling units, yielding an estimated mean of 1.04 adult males per uncanvassed unit ($47/45$). Multiplying this value by the number of block groups not observed on the night of the count ($1.04 * 158$), a projected count of 164 males are estimated to have been present in the uncanvassed sampling units on the night of the street count. The total estimated number of adult males in this stratum is finally calculated by adding the observed count to the estimated ($164+47$) value for a total of 211 males.

Repeating this procedure for the three other demographic categories produced an estimated total of 252 homeless present on the night of the count in the Medium Density strata. At a confidence interval of ± 10.0 , we are 95% confident that the true number lies between 242 and 262.

Repeating this procedure for the sampling units that were not canvassed in the Low Density strata resulted in an additional 1,035 homeless persons being added to the observed count bringing the estimated total to 1,057. At a confidence interval of ± 10.0 , we are 95% confident that the true number lies between 1,047 and 1,067. Finally, the same procedure was repeated with the six High Density block groups that were unable to be canvassed on the night of the count. This resulted in the addition of an estimated 22 homeless persons bringing the count from 361 to 383. At a confidence interval of $\pm 1.63\%$, we are 95% confident that the true number lies between 381 and 385. Summing these total a final estimate of 1,692 homeless persons were present on the night of the street count. Taking the confidence level into account, we can be 90% certain that had all 1099 working blocks been canvassed on the night of the count; the true value would have been between 1,680 and 1,714. **Table 2** depicts the count homeless persons in each of four demographic categories estimated to have been present on the night of the count separately by strata.

Table 2. Estimated Count of Homeless Persons Present on the Night of the Count

	Male Youth Count	Female Youth Count	Male Adult Count	Female Adult Count	Total Count
Low Density	0	144	805	108	1,057
Medium Density	18	0	211	23	252
High Density	11	11	290	71	383
Total	29	155	1,306	202	1,692

Recall that the tally sheet utilized during the street count instructed volunteers to quantify the numbers of cars with sleeping occupants, vans or RV's with electrical connections thought to house homeless persons, and encampments.

Table 3 depicts the total number of cars, RV's/Vans, and encampments thought to house homeless individuals counted in each stratum on the night of the count. Using the procedures discussed in the previous section it is estimated that had volunteers canvassed all 1,099 block groups in the County a total of 188 cars, 169 RV's/Vans, and 259 encampments would have been observed. Assuming, conservatively, that each unit (Car, RV/van, and encampment)

contained one homeless individual, it is projected that a minimum of an additional 616 persons would have been counted if volunteers been allowed to knock on the doors of these vehicles and encampments.

One thousand, thirty-nine individuals were observed in a shelter on the night of the count. Additionally, 145 motel vouchers were distributed on the night of the count. Adding these counts to the total number of persons estimated to have been present on the night of the count (not including the 616 persons estimated to have been present in cars, RVs/Vans, and encampments), increases the total number of homeless persons to 2,876.

Table 3. Actual Count and Mean Number of Cars/Vans/RVs and Encampments Observed

	Cars Count (Mean)	RV's/Vans Count (Mean)	Encampments Count (Mean)
Low Density	3 (.130)	3 (.130)	3 (.130)
Medium Density	8 (.180)	5 (.110)	21 (.470)
High Density	31 (.300)	27 (.260)	77 (.420)
Total	42	35	101

VI. HOMELESS SURVEY RESULTS

The following section details the result of the data collected through the administration of surveys to sheltered and unsheltered persons both on the night of the count and on the weeks thereafter. Throughout this section, attributes of the homeless population are presented collectively when differences between the surveyed sheltered and unsheltered populations are not statistically significant, and separately when they are. Recall that 64.4 % ($n=295$) of survey respondents are sheltered, while 35.6% ($n = 163$) are unsheltered.

A. AGE AND GENDER

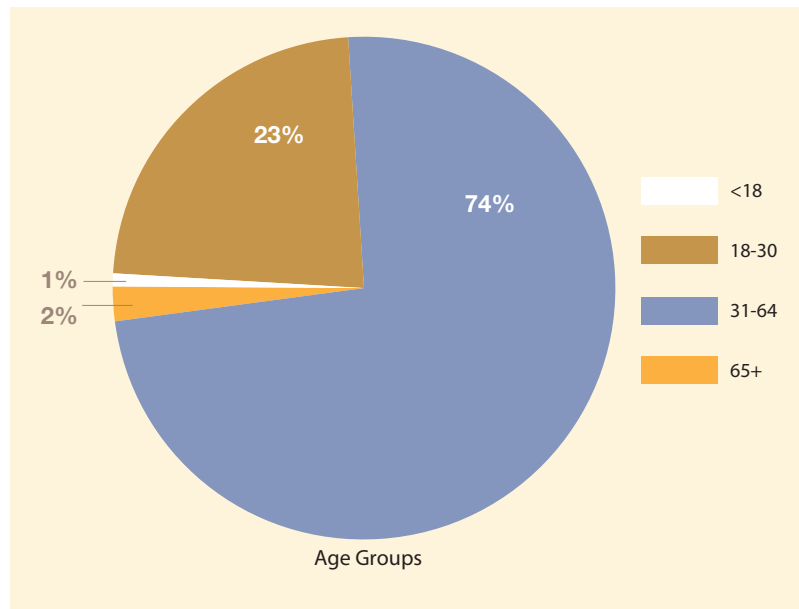
Sixty one and one tenths percent ($n= 291$; 61.1%) of survey completers are male, while the remaining 38.4% ($n= 183$) are female. Thirty one respondents declined to provide a response. Although a slightly higher proportion of females ($n= 123$; 67.2%) than males ($n= 172$; 59.1%) were surveyed in a shelter, this difference is not statistically. Conversely, a larger proportion of males were unsheltered when surveyed ($n= 119$; 40.9%) compared to females ($n= 60$; 32.8%), however this difference also failed to reach statistical significance.

Four hundred sixty-five respondents reported their age, while forty declined to do so. Of those who provided this information, age ranges from 16 to 80 years of age, with a mean of 41.47, a median of 43, and a mode of 48. On average, male respondents are significantly older ($M=42.7$) than females ($M= 38.7$), a difference that is statistically significant; $F(2, 442) = 1971.0, p <.01$.

For analytic purposes, age distribution was divided into four categories: under the age of 18; 18 to 30; 31 to 64; and 65 and over. **Figure 1** illustrates the age distribution of survey respondents using this classification. The largest proportion of survey respondents are between the ages of 31 and 64. The second most prevalent group, are between 18 to 30 years of age.

With two exceptions, age is unrelated to housing status (sheltered vs. unsheltered) at the time of survey completion. All seven youth under the age of 18 who were surveyed (100%) were unsheltered. Additionally, compared to

Figure 1. Age Distribution of Survey Respondents



those between the ages of 18 and 64 ($n= 290$; 64%), a lower proportion of those over the age of 65 ($n= 5$; 5.6%) were sheltered at the time of survey completion. While these differences are noteworthy, they are not statistically significant due to insufficient sample size.

B. HOUSEHOLD COMPOSITION

The majority of survey respondents ($n= 293$; 61.7%) report living alone. Of the 182 who do not, 48 (26.4%) report living with a spouse, eight (4.4%) with one or more parents, 20 (11.0%) with friends, 14 (7.7%) with other family members, 91 (50%) with children, and 14 (7.7%) with some "Other" person including ex-wives, roommates, shelter residents, acquaintances, and other homeless persons. Seventy-one

respondents declined to provide this information. The available data was utilized to construct a measure of household composition. As illustrated in **Figure 2**, while the majority of both sheltered and unsheltered respondents live alone (66.1% and 70.1%, respectively), a larger proportion of sheltered respondents live with children, either as single adults ($n=38$; 9.6%) or with another adult ($n=50$; 17.9%). Conversely, a smaller proportion of sheltered adults ($n=18$; 6.4%) live in a household with just adults than

unsheltered adults ($n=35$; 22.7%); $\chi^2(1, 434) = 42.9, p < .001$.

Age is also related to household composition, with a larger proportion of those between the ages of 18 and 64 ($n=84$; 20.6%) residing with children (either alone or with other adults) than those under the age of 18 or over the age of 65 ($n=0$; 0.0%). Those over the age of 31 were more likely to report living alone ($n=231$; 72.8%) compared to those under the age of 30 ($n=50$; 50.1%); $\chi^2(1, 416) = 24.5, p < .05$. Finally,

Figure 2. Household Composition

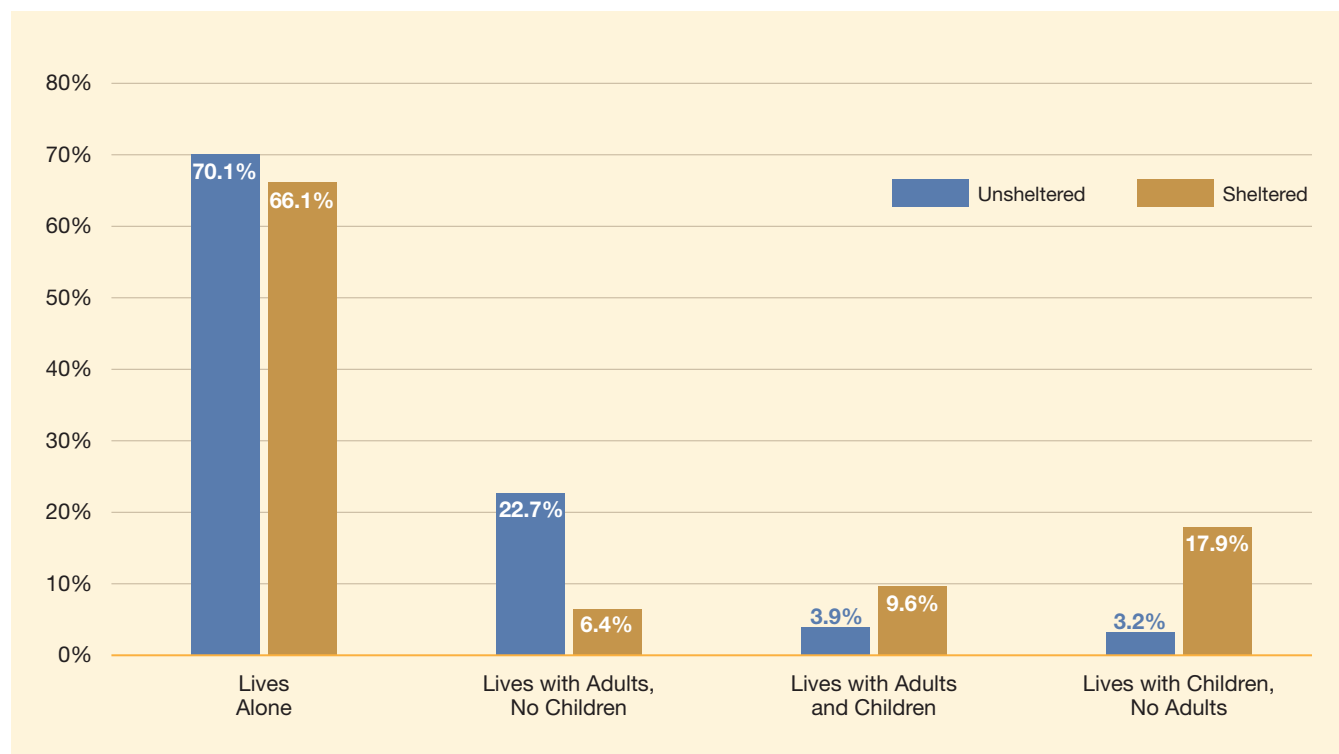
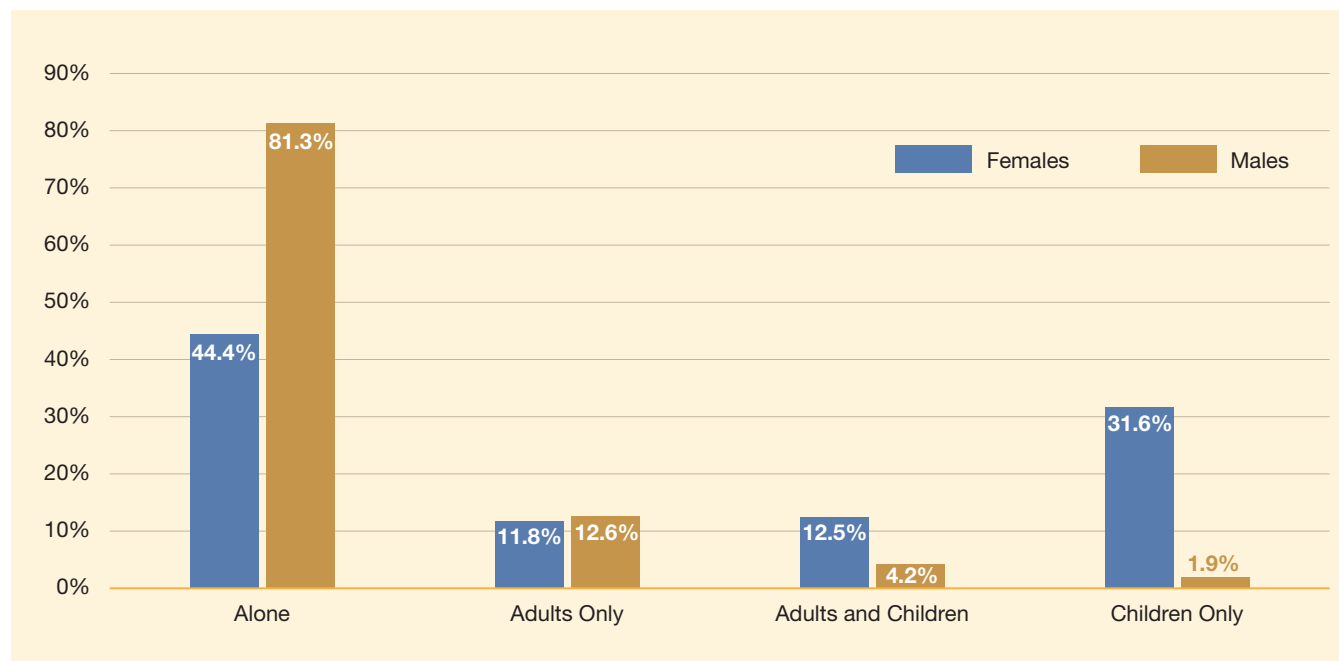


Figure 3. Household Composition by Gender



as illustrated in **Figure 3**, gender is predictably related to household composition such that men are more likely to report living alone compared to women, while women are more likely to report living in a household with children; $\chi^2 (1, 416) = 96.31, p < .001$. What is also noteworthy about Figure 3 is that it illustrates the fact that homeless women who live with children are more likely to consist of single parents than dual parent households.

C. EMPLOYMENT AND EDUCATION

Fifteen percent ($n=72$) of survey respondents indicate being currently employed, a proportion that does not differ by location of survey

administration (sheltered or unsheltered) or age of survey respondent. A slightly higher proportion of female respondents ($n= 33$; 19.5%) report being employed, than men ($n=36$; 12.5%) a difference that is not statistically significant. Twenty-five survey respondents declined to provide information on their employment status.

Of the 476 persons who responded, 13.2% ($n= 63$) indicate that they are currently students. While the proportion of sheltered and unsheltered respondents who are currently students does not differ statistically, student status is related to age and gender. Like the findings regarding employment status, 22.8% of female respondents ($n= 38$) are students, compared to only 8.1% ($n= 23$) of male respondents, $\chi^2 (2, 454) = 19.83, p < .001$.

Figure 4. Student Status by Age of Survey Respondent



Furthermore, as illustrated in **Figure 4**, student status is negatively related to age, with a higher proportion of younger respondents being students compared to older ones; $\chi^2 (3, 441) = 59.5, p < .001$.

D. DURATION AND EPISODES OF HOMELESSNESS

Nearly 60% (58.8%; $n = 284$) of survey respondents indicate being homeless twelve months or more, while 41.2% ($n = 199$) report being homeless for fewer than twelve months. No response was provided by 25 (4.9%) survey respondents.

Looking at the number of episodes of homelessness experienced in the last three years, nearly one third of survey respondents ($n = 134$; 30.0%) report experiencing at least four episodes in the last three years, while 69.5% ($n = 310$) report fewer than four episodes. Interestingly, 64 respondents (12.6%) either did not know the answer to this question or refused to provide a response. A significantly larger proportion of respondents who reported

being homeless for 12 months or longer (44.2%) had experienced four or more episodes of homelessness over the last three years compared to those who had not (9.7%); $\chi^2 (1, 441) = 59.48, p < .001$.

Combining these two items together, 63.8% of survey respondents had been homeless for at least 12 months **or** had experienced four or more episodes of homelessness in the past three years, one indicator of chronic homelessness. Neither age nor gender was related to having experienced homelessness of a chronic duration as measured by this indicator, however location of survey completion was. As would be expected, a greater proportion of respondents surveyed at an unsheltered location ($n = 102$; 72.9%) had experienced chronic homelessness using this definition, compared to those who were sheltered at the time of survey completions ($n = 166$; 58.9%); $\chi^2 (1, 422) = 7.90, p < .01$.

As will be described in proceeding sections, HUD places more stringent parameters on the definition of chronic homelessness, requiring the presence of significant and long-standing disability (alcohol or drugs) or addiction. Adding this criterion serves to deflate the

percentage of individuals experiencing chronic homelessness, which is estimated to be 63.8% when using duration and number of episodes of homelessness alone as an indicator.

E. USUAL SLEEPING PLACE

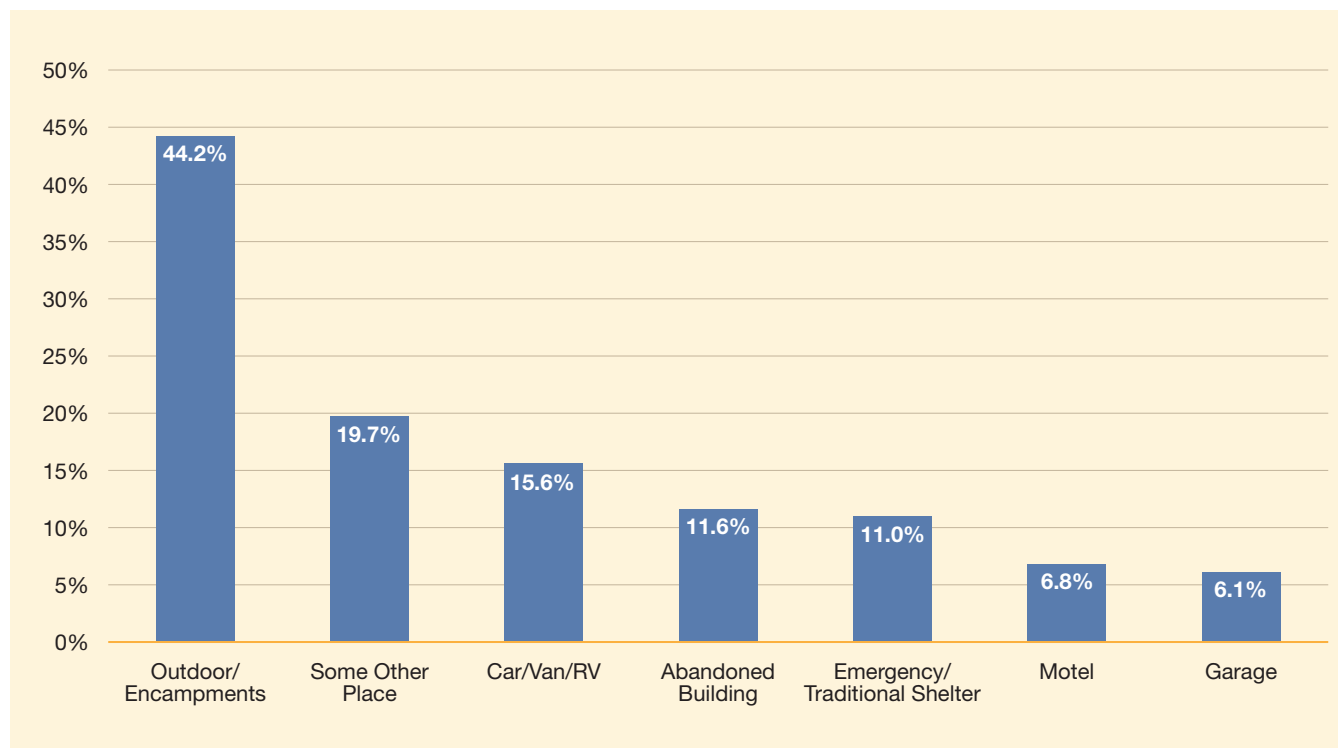
Unsheltered survey respondents were asked to indicate which of seven locations they had been recently staying. Forty-seven (24.2%) respondents declined to provide a response. Of the 147 who did, up to four locations were selected. The majority ($n = 106$; 89.8%), however, selected only one location, while 11 (7.5%) selected two locations, one (.7%) selected three, and three (2.0%) selected four. **Figure 5** illustrates the proportions of unsheltered survey respondents who recently stayed in each of the seven locations.

The top four locations in which unsheltered homeless have recently stayed are Outdoor Encampment/ Street (44.2%), Some “Other” location (19.7%), a Car, Van, Truck or RV (15.6%), and an abandoned building (11.6%),

accounting for over 90% of the locations named. Because respondents could endorse more than one location, the total number of locations endorsed exceeds the number of respondents ($n = 147$), and the proportions presented in Figure 5 sum to more than 100%. Asked to describe what “Other” location they had stayed in, six indicated having temporarily stayed with a family member (parent, child, ex-wife, or other relative), nine with a friend, or work colleague, and one each at a “Rehab center,” “Room,” “Room and board,” “Temporary situation,” “Textit,” and “Wash [Laundry Mat].”

With two exceptions, gender is not related to type of locations that unsheltered homeless persons reside. A significantly larger proportion of unsheltered males ($n = 21$; 21.0%) report having stayed in a car/RV/Van than women ($n = 2$; 5.1%); $\chi^2 (1, 139) = 5.12, p < .05$. Conversely a lower proportion of males ($n = 15$; 17.6%) report having stayed at some “Other” location compared to women ($n = 12$; 36.4%); $\chi^2 (1, 118) = 4.72, p < .05$. Locations in which unsheltered homeless persons report having resided recently is not related to age.

Figure 5. Locations Where Unsheltered Homeless Persons Have Stayed



F. PHYSICAL, MENTAL HEALTH, AND DEVELOPMENTAL DISABILITIES

Approximately three in ten survey respondents report being physically disabled ($n=148$; 32.0%) or mentally ill ($n=138$; 30.0%), while a little over two in ten indicate having some form of developmental disability ($n=102$; 22%)

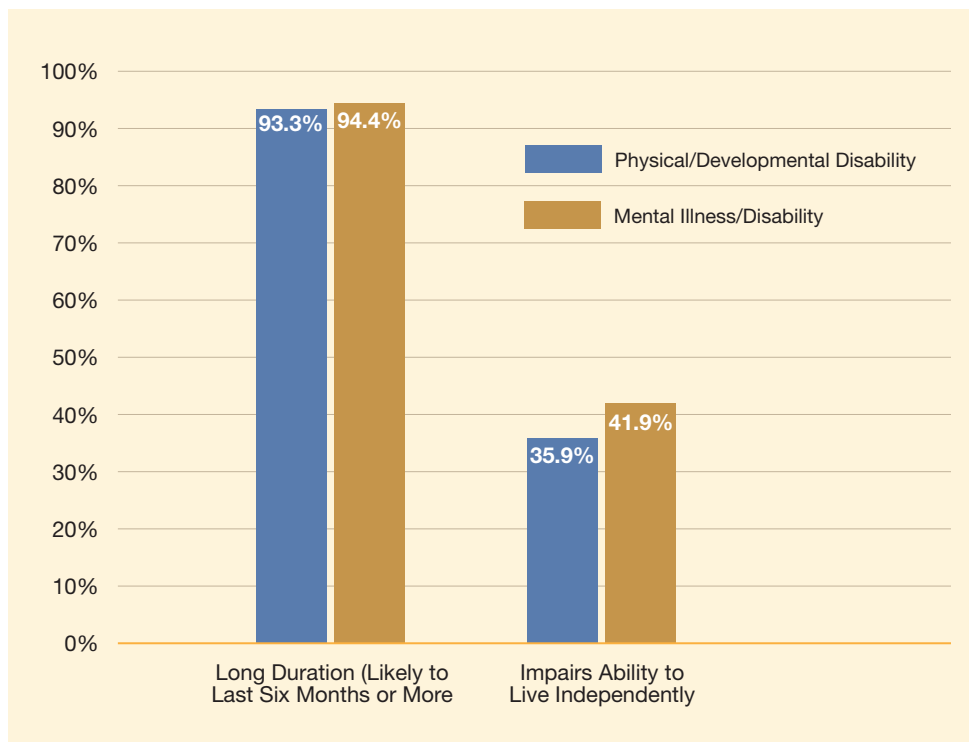
Gender is unrelated to the presence of a physical, developmental, or mental disability. As would be expected, however, age is related to the presence of a physical disability, with a larger proportion of those between the ages of 31 and 64 ($n=116$; 35.3%) having a physical disability than those between the ages of 18 and 30 ($n=22$; 20.8%); $\chi^2(1, 450) = 22.3, p < .001$. Age is unrelated to the presence of a developmental or mental disability. Location of survey completion is also related also to the presence of a physical disability, with a higher proportion of unsheltered survey respondents ($n=65$; 39.4%) reporting the presence of a physical disability compared to sheltered survey respondents ($n=83$; 27.9%); $\chi^2(1, 463) = 6.51, p < .05$.

The presence of one disability is strongly

correlated with the presence of another, with 13.5% ($n=61$) experiencing two disabilities, and nearly 10% ($n=45$; 9.9%) experiencing all three. Considering all three disabilities together, a little more than one in two survey respondents suffers from at least one of these three disabilities ($n=235$; 52.0%).

As a follow-up, respondents with a physical or developmental disability indicated whether the presence of either condition was “Long-standing and likely to last six months or longer” and whether it “Substantially impaired” their ability to live. Those experiencing a mental health disability also responded to these two follow up items. These two follow-up items were designed to assess the perceived severity of physical, developmental, and mental health disabilities as experienced by survey respondents. As illustrated in **Figure 6**, more than nine in ten of respondents experiencing either a physical/developmental disability ($n=126$; 93.3%), or a mental health disability ($n=119$; 94.4%), indicate that the condition is long-standing, and likely to last six months or longer. Despite this fact, 35.9% ($n=47$) and 41.9% ($n=52$) of these

Figure 6. Severity of Physical, Developmental, and Mental Health Disabilities



same respondents indicate that their condition, whether it be physical/developmental or mental health, substantially impairs their ability to live independently. Also noteworthy is the fact that respondents with mental health conditions (41.9%) are more likely to indicate being impaired by them than those with physical/developmental disabilities (35.9%). Perceived severity of disability as measured by these two follow-up items was unrelated to age, gender, or location in which the survey was administered.

Respondents who report having a mental health condition also indicated whether they were currently taking medications or had ever been hospitalized as a result of their illness. Of those who responded, nearly equal proportions reported taking medication ($n= 77$; 56.6%) or having ever been hospitalized ($n= 77$; 55.8%) for their condition. Gender and age were not related to whether respondents indicated having ever been hospitalized or currently taking medication for a mental condition.

Figure 7 illustrates that while sheltered and unsheltered survey respondents report having been hospitalized at nearly equal proportions for their mental health condition ($n= 50$; 57.5% and

$n= 27$; 52.9%, respectively), there is a disparity in current use of medication. A significantly higher proportion of sheltered respondents reporting being on medication at the time of survey administration ($n= 58$; 66.7%) than unsheltered respondents ($n= 19$; 38.8%); $\chi^2 (1, 136) = 9.93, p < .01$. This result is consistent with those found during the 2009 Point-In-Time Count of the Homeless which indicate that unsheltered homeless are less likely to access public services.

G. SUBSTANCE ABUSE

Of those who provided a response, a little over three in ten survey respondents ($n= 147$; 31.1%) report having an alcohol or drug problem. This proportion does not differ significantly by age, gender, or location of survey administration. Thirty-three respondents declined to provide this information. Of those who do report having a substance abuse problem, 29% ($n= 44$) report using Cocaine, Crack, Heroin, PCP or LSD, Uppers/Speed, or Downers/Tranquilizers.

Figure 7. Current Medication Use and Past Hospitalizations Among Mentally Ill Survey Respondents

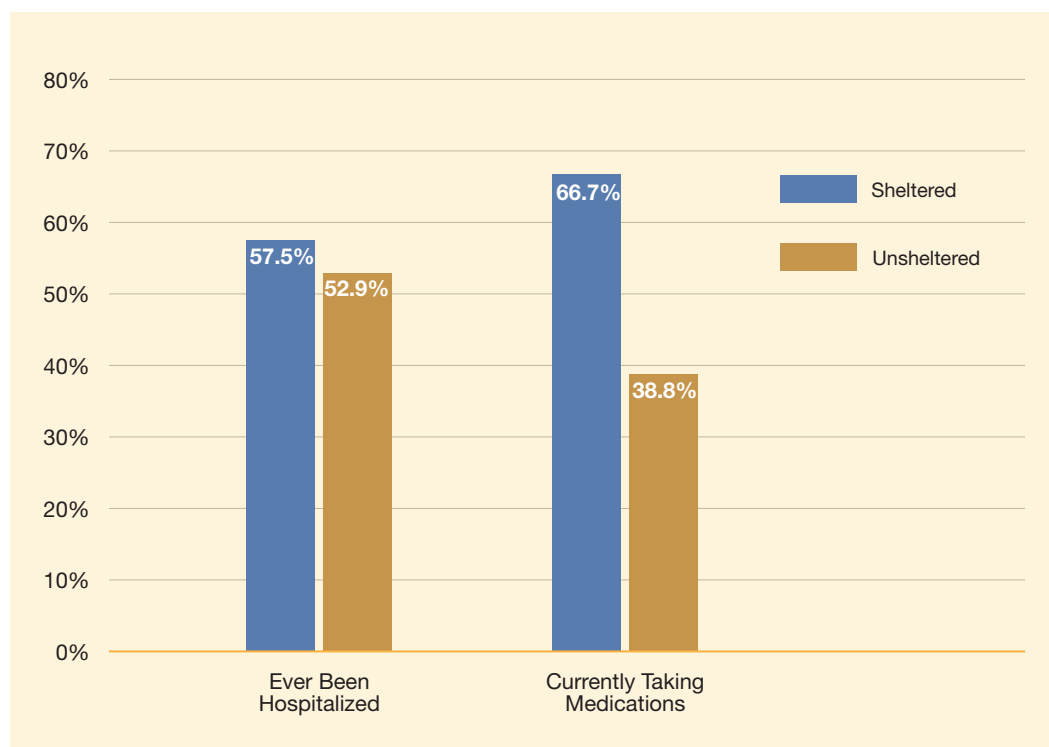
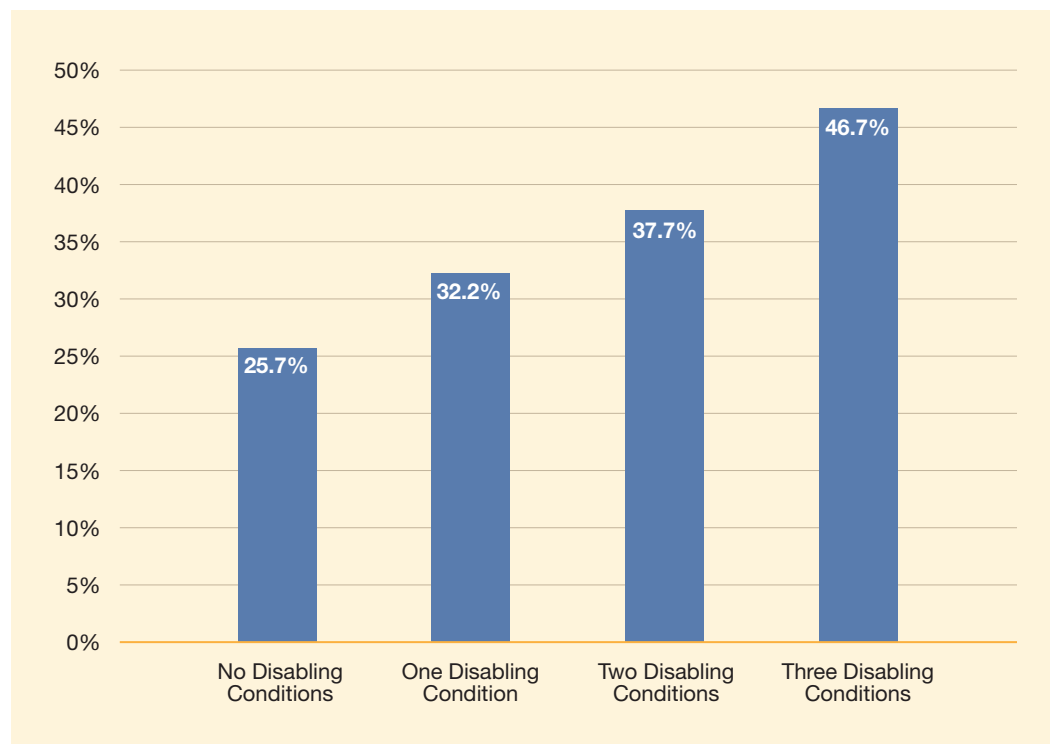


Figure 8. Chronic Homelessness by Number of Disabling Conditions



As a follow-up, respondents who report having a substance abuse problem indicated whether the problem was “Long-standing and likely to last six months or longer” and whether it “Substantially impaired” their ability to live. Similar to the findings about the duration and severity of physical/developmental and mental health disabilities, while slightly more than seven in ten ($n = 109$; 66.9%) of those with substance abuse issues report their issue as being long-standing and likely to last six months or more, only three in ten ($n = 45$; 30.0%) report that it impairs their ability to live independently. With one exception, the duration and perceived severity of a respondent’s drug abuse problem is not related to age, gender, or location of survey administration. A greater proportion of male substance users ($n = 77$; 72.0%) indicate that their substance abuse problem is of long duration compared to females ($n = 24$; 52.2%); $\chi^2 (2, 153) = 6.48, p < .05$.

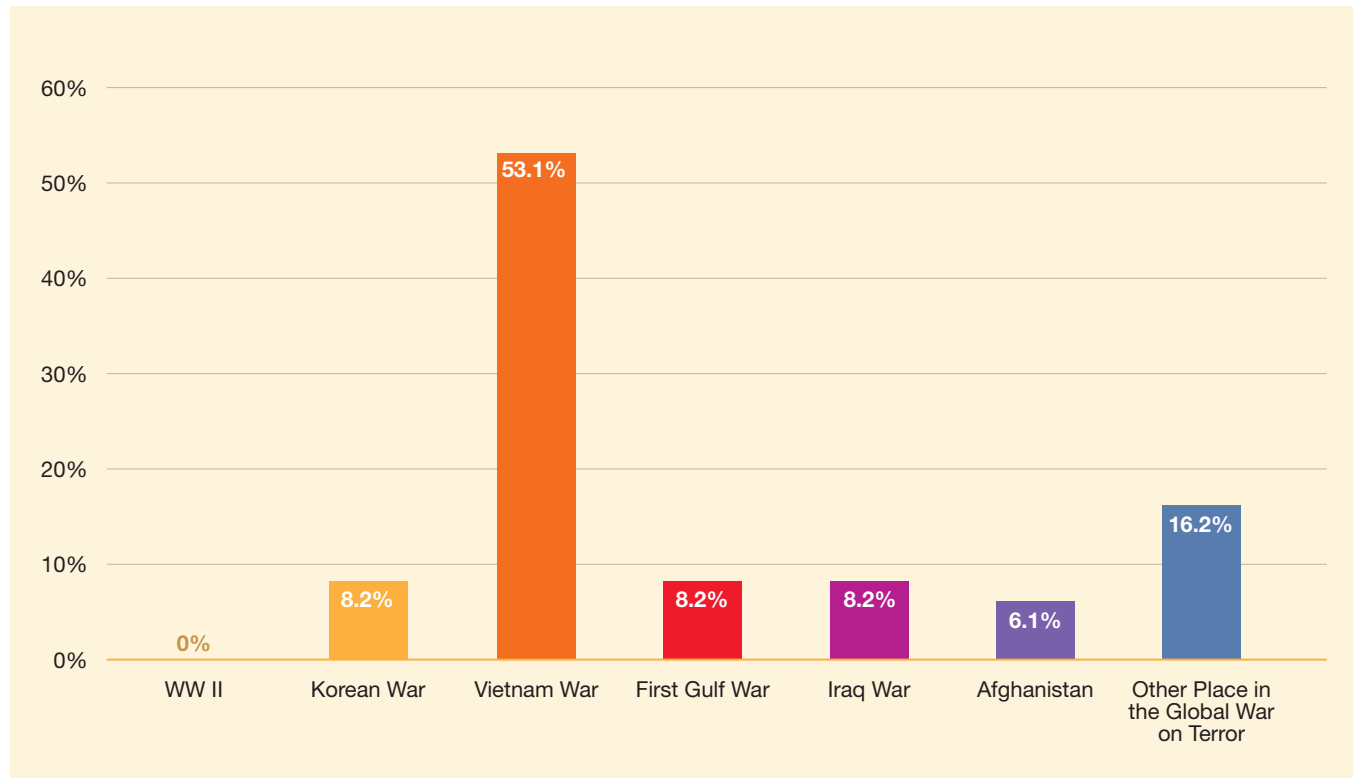
As shown in **Figure 8**, the number of disabilities experienced by survey respondents is positively related to the presence of substance abuse, with the greatest proportion of substance abuse being observed among those with

physical, developmental, and mental health disabilities; $\chi^2 (3, 451) = 6.48, p < .05$.

Recall that in order for an individual to qualify as being chronically homeless, HUD requires that they be homeless for at least 12 months or more **or** that they have experienced four or more episodes of homelessness in the last three years. **Additionally**, HUD requires that they have a long-lasting disability, likely to last six months or more that impairs their ability to live independently. Although, 63.8% of survey respondents had been homeless for at least 12 months **or** had experienced four or more episodes of homelessness in the past three years, they do not meet HUD’s criteria for chronic homelessness. Analyzing the frequency and duration of homelessness data in conjunction with the data on the presence and severity of disability, yields a quite different estimate. Using this definition, 45.8% ($n = 195$) of survey respondents can be considered chronically homeless.

Whether a respondent could be classified as homeless using HUD’s criteria is not related to age, gender. However, a larger proportion of unsheltered survey completers ($n = 113$; 58.9%)

Figure 9. Wars That U.S. Veterans Served In



met HUD’s criteria for chronic homelessness compared to those who were sheltered ($n=74$; 41.1%); $\chi^2(1, 419) = 8.33, p < .01$.

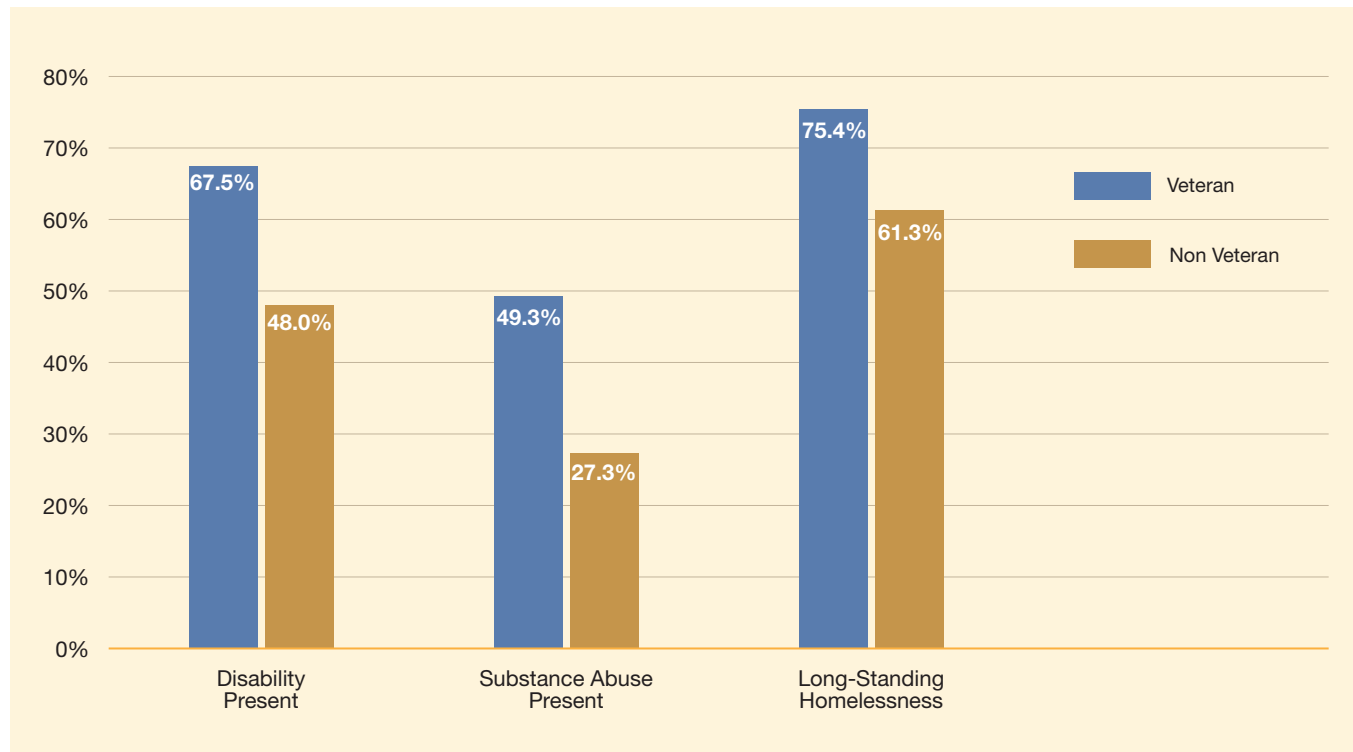
H. VETERAN STATUS

A veteran is defined as a person who served in the active military, naval or air service, and who was discharged or released under conditions other than dishonorable. Seventy-seven (16.3%) of the 471 homeless respondents who answered the question, “Are you a United States Veteran?” responded affirmatively. The survey did not inquire about discharge status. Twelve (15.6%) of the United States Veterans who completed a survey report being activated into duty as a member of the National Guard or as a Reservist. As shown in **Figure 9**, of the 49 respondents who served in the U.S. military and who provided a response, the majority served in the Vietnam War ($n=26$; 53.1%), followed by 16.3% ($n=8$) who served in some other place on the global war on terror. Four each (8.2%) served in the Korean and First

Gulf War, and three (6.1%) served in Iraq.

A larger proportion of respondents aged 65 and over are U.S. Veterans ($n=4$; 50%), compared to those 64 years of age or less ($n=1$; .2%); however due to insufficient sample size, this difference is not statistically significant. Additionally, as would be expected, a larger proportion of males are U.S. Veterans ($n=66$; 23.7%) compared to female respondents; $\chi^2(1, 450) = 31.27, p < .001$. As shown in **Figure 10** on the next page, homeless U.S. Veterans in the sample are more likely to have had one or more disabilities ($n=50$; 67%), a substance abuse issue ($n=36$; 49.3%), or been homeless for over one year or more than four times in three years ($n=52$; 75.4%), compared to those who are not veterans ($n=179$; 48%; $n=106$; 27.3%; and $n=220$; 61.3%, respectively), differences that are statistically significant; $\chi^2(3, 443) = 11.55, p < .01$; $\chi^2(1, 461) = 13.95, p < .001$; and $\chi^2(1, 428) = 4.94, p < .05$. As would be expected from these findings, U.S. Veterans in the survey sample are more likely to meet HUD’s definition for chronic homeless ($n=40$; 58.8%) compared to those who did not serve in the military ($n=$

Figure 10. Conditions Impacting Homeless Persons by Veteran Status



146; 42.7%); $\chi^2 (1, 411) = 7.16, p < .05$. Veteran status was not related to the location of survey administration.

I. HISTORY OF VICTIMIZATION

Of those who provided a response, nearly three in ten ($n = 132$; 28.4%) had been a victim of domestic or intimate partner violence at some point in their life. Forty declined to provide a response. The majority of the survey completers with a history of domestic violence ($n = 103$; 79.8%) indicate having experienced this situation more than one year ago, while a little more than two in ten ($n = 26$; 20.1%) indicate having more recent experiences with. Three domestic violence survivors decline to respond to the survey item.

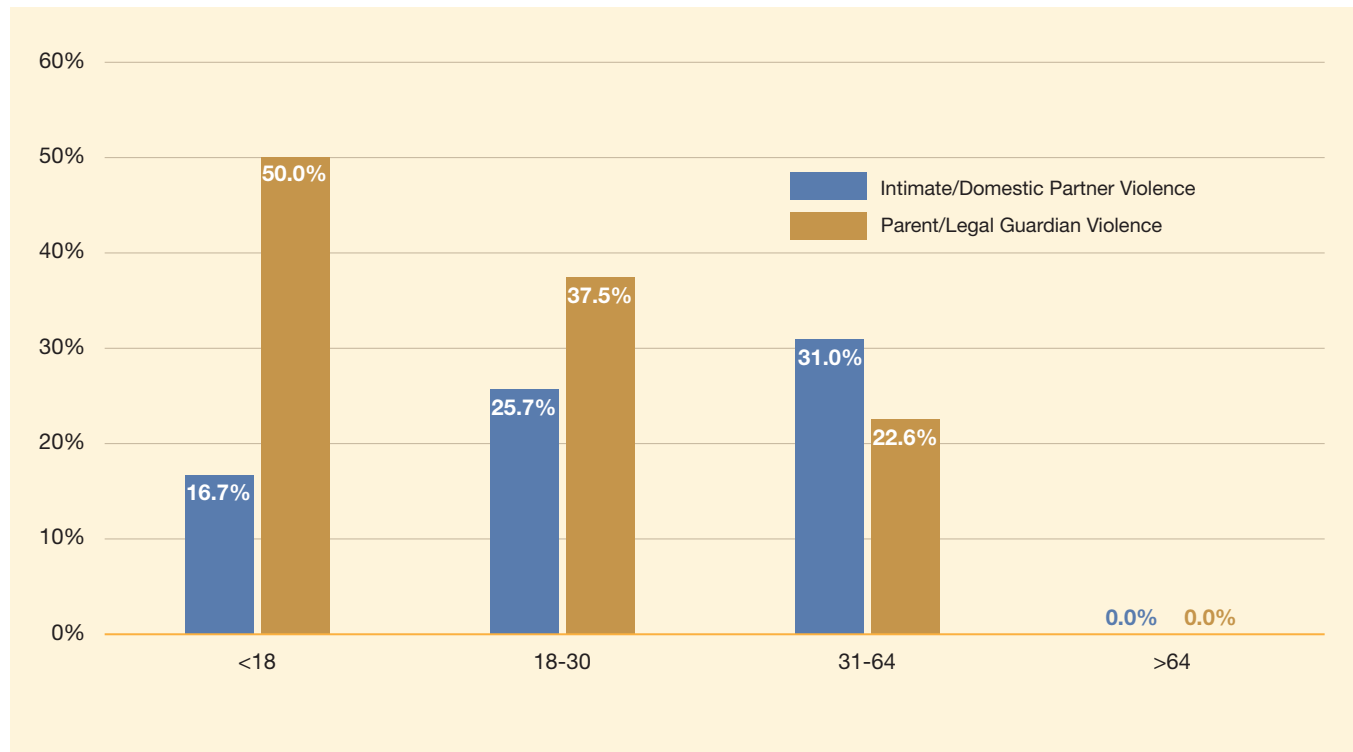
Of the 463 who provided a response, a little more of one quarter of the survey sample ($n = 118$; 25.5%) report having been victims of violence at the hand of a parent or guardian. Again, the majority of those with a history of victimization by a parent or a guardian ($n = 94$; 89.8%) report having last experienced this

more than one year ago. While eleven (10.2%) report having experienced more recent parental/guardian violence. Of these eleven, only one (9.1%) was a minor, while four (36.3%) were between the ages of 18 and 30, and six (54.5%) were between the ages of 31 and 64.

Of those experiencing violence either at the hands of a spouse/domestic partner or parent/legal guardian 35.2% ($n = 64$), experienced both.

A history of violence, either at the hand of a domestic partner or a parent, was not related to the location of survey completion. While the proportion of survey respondents experiencing violence at the hands of their parents or legal guardians did not differ by gender, a larger proportion of females ($n = 81$; 49.1%) report being domestic violence survivors than men ($n = 45$; 16.2%); $\chi^2 (1, 443) = 55.21, p < .001$. Additionally, as illustrated in **Figure 11** on the next page, victimization is related to age, with a larger proportion of younger respondents having experienced parental/legal guardianship compared to older respondents; $\chi^2 (1, 449) = 13.4, p < .01$. Conversely, the proportion of respondents experiencing domestic/intimate partner violence increased incrementally with

Figure 11. History of Violence by Age



age, with one exception. No respondents over the age of 64 report experiencing domestic/intimate partner violence. This is likely due to the fact the majority of survey respondents in this age category are male.

A larger proportion of domestic ($n=76$; 60.3%) and parental violence survivors ($n=73$; 67.6%) have some form of physical, developmental, or mental health disability compared to those who have not experienced such events ($n=155$; 49.1% and $n=155$; 46.7%, respectively), differences that are statically significant; $\chi^2(1,442) = 4.58, p < .05$ and $\chi^2(1,440) = 14.3, p < .001$. While the proportion of respondents with substance abuse issues is not impacted by a history of violence at the hand of a parent or parental guardian, those who have experienced domestic/intimate partner violence are more likely to report a substance abuse problem ($n=44$; 37.9%) than those who have not ($n=95$; 27.9%); $\chi^2(1,456) = 4.07, p < .05$.

J. RUNAWAY YOUTH STATUS AND HIV/AIDS STATUS

Twenty-eight survey respondents (6.1%) indicate that they are or were runaway youth. Interestingly, none of these persons were minors, meaning that all seven of the youth surveyed were accompanied by a parent or legal guardian. These results indicate that homeless adults who run away from home as minors may still identify as runaway youth into young adulthood and beyond. Because of the small percentage of respondents who report having been runaway youth, no follow-up analysis was conducted, as sample sizes were too small for meaningful interpretation.

Only seven survey respondents (1.5%) report having AIDS or being diagnosed as HIV positive. Again, given the small percentage of respondents who report having this condition, no further analysis was conducted.

VII. CHARACTERISTICS OF HOMELESS PERSONS ESTIMATED TO HAVE BEEN PRESENT DURING THE 2011 POINT-IN-TIME COUNT OF THE HOMELESS

The results of the survey were used to estimate the characteristics of the homeless individuals estimated to have been present during the night of the Point-In-Time Count of the Homeless. The best method of producing CoC population and subpopulation counts involves computing the ratios within each sheltered and unsheltered gender and age category from the survey data, and multiplying these by the counts by gender and age produced during the Point-In-Time Count. The results of this process yielded the data

depicted in Tables 4 and 5. As shown in **Table 4**, of the 2,813 homeless persons estimated to have been present on the night of the count, 41.0% were sheltered and 59% were sleeping in unsheltered locations (59.0%). In total the 2,816 persons are estimated to have accounted for 1,393 households. The majority of households estimated to have been present on the night of the count are without children ($n= 1,363$; 67.6%), while 909, or 32.3% contain children. Only three households consisting of unaccompanied youth are estimated to have

Table 4. Persons in Households by the Presence of Children

	Sheltered Count		Unsheltered Count	Total Count
	Emergency	Transitional		
Households with Children				
Number of Households	72	59	89	220
Number of Adults and Children	360	223	326	909
Households Without Children				
Number of Households	141	91	937	1,170
Number of Adults and Children	293	245	1,363	1,901
Households With Only Children				
Number of Households	0	0	3	3
Number of Children	0	0	3	3
Totals				
Number of Households	213	151	1,029	1,393
Number of Adults and Children	656	468	1,692	2,816

Table 5. Chronically Homeless and Other Subpopulations

	Sheltered Count (%)	Unsheltered Count (%)	Total Count (%)
Chronically Homeless Individuals	47 (4.2)	122 (7.2)	169 (6.0)
Households	13 (3.6)	58 (7.7)	71 (5.1)
Veterans	68 (6.0)	166 (9.8)	234 (8.3)
Severely Mentally Ill	61 (5.4)	143 (12.7)	204 (7.2)
Chronic Substance Abuse	118 (10.5)	257 (15.2)	375 (13.3)
Persons With HIV/AIDS	7 (.006)	18 (.01)	25 (.008)
Victims of Domestic Violence	175 (15.6)	282 (16.6)	457 (16.1)
Number of Adults and Children	0 (0.0)	3 (.001)	3 (.001)

been present on the night of the count.

Table 5 depicts the estimated number of homeless persons estimated to have been present on the night of the count who are members of special sub-populations identified by HUD: 1) chronically homeless; 2) veterans; 3) severely mentally ill; 4) victims of domestic violence; 5) chronic substance abusers; 6) persons with HIV/AIDS; and unaccompanied youth. As depicted in Table 5, a greater proportion of unsheltered homeless persons suffer from severe mental illness or substance abuse issues. Furthermore, unsheltered homeless persons are more likely to be chronically homeless as defined by HUD and to have served in the United States military. Table 5 also demonstrates that the most pressing problems experienced by homeless persons are domestic violence, substance abuse and severe mental illness.

The estimates produced in Tables 4 and 5 should be interpreted with caution. Recall that surveys were administered both on the

night of the count, in addition to the several weeks thereafter. Due to time and resource constraints, there was limited survey time on the ground on the night of the Point-In-Time Count (few surveys were administered). In the weeks following the count, OHS staff continued administering surveys to unsheltered homeless persons encountered in outdoor locations (e.g. parks, on the street) but also to persons that were attracted to day services or free meal events following the Point-in-Time Count. While simplifying the process on the night of the count, this method of survey data collection simultaneously complicates the process of projecting results to the unsheltered homeless population that was actually observed on the night of the count. It is possible that homeless persons surveyed on the night of the count may differ in some important way than those surveyed in the weeks following the count. The issue, then, is confidence in the extent to which the survey data accurately represent the observed unsheltered homeless population.

APPENDIX A: TERMS AND DEFINITIONS

Census Block Group

A geographic unit used by the Census Bureau. Block Groups generally represent a population of between 600 and 3,000 people, with an optimum size of 1,500 people.

Census Tract

A relatively permanent statistical subdivision of a county used for the purpose of presenting data. Census tract boundaries normally follow visible features, but may follow governmental unit boundaries and other non-visible features in some instances. The spatial size of census tracts varies widely depending on the density of settlement, ranging from a population of 2,000 to 8,000 inhabitants (an average of about 4,000 inhabitants is preferred).

Chronically Homeless Person

Defined by HUD as an unaccompanied homeless individual or family with a disabling condition who has either been continuously homeless for a year or more or has had at least four (4) episodes of homelessness in the past three (3) years. In defining chronically homeless, the term “homeless” means “a person sleeping in a place not meant for human habitation (e.g. living on the streets) or in an emergency shelter.” HUD defines “disabling condition” as “a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions.”

Continuum of Care (CoC)

The Continuum of Care refers to a community plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness. It also refers to the system of services that help people move from homelessness to housing.

Deployment Center

The designated sites throughout San Bernardino County where volunteers reported to participate in the Unsheltered Street Count. Volunteers worked in assigned teams to canvass a specific area to tally observed homeless persons.

Domestic Violence Program

Any residential program whose primary mission is to serve victims of domestic violence. Services are facilitated through education, counseling, legal advocacy, and support groups to improve and enhance the level of confidence and self-esteem of the participants empowering them to take control of their own lives.

Emergency Shelter Program

A temporary shelter with services that are designed to facilitate homeless individuals and families transition from sleeping in places not meant for human habitation to appropriate housing. Emergency Shelter is provided free of charge for a maximum of ninety-days. On a case-by-case basis, clients may remain for longer than ninety days if they require a longer period to accomplish a specific goal.

Encampment

Temporary, makeshift housing created by homeless persons, such as tents and boxes on sidewalks, under bridges, or other outdoor locations not typically meant for human habitation.

Enumerator

Worked in field teams of two or more and tallied the number of observed homeless persons in a defined geographic area (census block group/s) during the unsheltered street count.

Extrapolation

A technique for estimating the total number of homeless persons in a population or category based upon a) the number of unsheltered and sheltered homeless persons observed during the Homeless Count (to obtain a complete count)

and b) proportions derived from survey data to estimate subpopulation numbers, e.g. chronic homelessness, etc.

Family

Family is defined as any of the following: Minor parents with child(ren); one or more adults with legal custody of minor child(ren); a couple in which one person is pregnant; grandparents or others who are legal guardians with child(ren) present; multi-generational families with grandparents, parents (adult child) and minor child(ren).

Foster Youth

A term describing young people who are wards of the foster care system up to age 18. Those youth discharged from the child welfare system when reaching the majority age of 18, judicially relieving the care, custody, and control of the young adult are frequently referred to as an “emancipated foster youth.”

Geocoding

The process of assigning geographic identifiers (e.g., codes or geographic coordinates expressed as latitude-longitude) to map features and other data records, such as street addresses.

Homeless Veterans

An eligible Veteran is defined as one who: (1) served on active duty in the US armed forces for more than 160 days and was discharged with other than a dishonorable discharge; (2) was discharged or released from active duty because of a service connected disability; or (3) served on active duty during a period of war, or in a campaign or expedition to which a campaign badge is authorized.

Homeless (HUD McKinney-Vento Act definition)

An individual who lacks a fixed, regular, and adequate nighttime residence. An individual who has a primary nighttime residence that is: a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill), or an institution that provides a

temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

Homeless Count

For the 2011 San Bernardino County Homeless Count, this process (also known as an enumeration or census) was performed by using U.S. Department of Housing and Urban Development-recommended practices for counting homeless people and estimating the number of homeless people at any given time. This comprehensive study includes a (1) Street Count, (2) Shelter Count, and (3) Homeless Demographic Survey.

HUD - United States Department of Housing and Urban Development

A federal department created in 1965 to increase homeownership, support community development and housing free from discrimination. Since 1987 HUD has been responsible for funding homeless programs, which today comprise the Continuum of Care.

Individual

A person over age 18, not accompanied by minor child(ren).

Individuals with Disabilities

A person has a disability if she or he has at least one of the following: (1) has a physical or mental impairment that substantially limits a major life activity, (2) has a record of such impairment, or (3) is regarded as having such an impairment.

McKinney-Vento Act

The primary federal legislation used to (1) establish an Interagency Council on the Homeless; (2) use public resources and programs in a more coordinated manner to meet the critically urgent needs of the homeless of the Nation; and (3) provide funds for programs to assist the homeless, with special emphasis on elderly persons, handicapped persons, families with children, Native Americans, and veterans.

Permanent Supportive Housing

Long-term housing that is commonly community-based with supportive services

designed to enable homeless persons with disabilities to live as independently as possible in a permanent setting. Permanent housing can be provided in one structure or several structures at one site or in multiple structures at scattered sites.

Point-In-Time Count

A one-day, statistically reliable, unduplicated count of sheltered and unsheltered homeless individuals and families in San Bernardino County. It is required that communities using HUD Continuum of Care Homeless Assistance Funding to serve the homeless conduct a count every two years, beginning in 2005, during the last ten days of January.

Section 8

The common name for the federal housing subsidy program that is administered locally by housing authorities. The “Section 8” program is formally known as the Housing Choice Voucher program. The subsidy program is both tenant and project-based. The Section 8 voucher program provides assistance in order for the voucher recipient to pay no more than 30% of their gross monthly income on rent in a unit that complies with the rent guidelines. Housing authorities may spend a portion of their Section 8 certificate program funds to specific projects and thus subsidizing the unit.

Sheltered Homeless

Someone who is homeless and is being temporarily housed in a homeless shelter (emergency and transitional) or motels/hotels that accept vouchers.

Shelters

See Emergency Shelter Program and Transitional Housing Program

Single Room Occupancy (SRO)

Private rooms that contain either food preparation or sanitary facilities, or both, that are designed for occupancy by a single individual.

Substance Abuse, Individuals

Individuals who have acknowledged addiction problems related to alcohol and drug use and who seek services or housing to support their sobriety.

Survey Proctor

Presented survey questions and recorded responses of homeless persons throughout San Bernardino County.

Transitional Housing Program

A type of housing that facilitates the movement of homeless individuals and families to permanent housing, typically within twenty-four (24) months. Services provided in transitional housing must promote residential stability and increased skill level or income in order to prepare homeless persons to live more independently.

Unaccompanied Youth

Individuals who are under 18 years of age who have experienced homelessness on their own, without parent or guardian. A minor with children of his or her own is considered a member of a family unit and not an unaccompanied youth.

Unsheltered Homeless

Someone who is either living on the streets, or in a vehicle, encampment, abandoned building, garage, or any other place not normally used or meant for human habitation.

Young Adults (18-24)

Programs serving unaccompanied persons age 18 to 24. This group faces particular challenges because they have reached adulthood in legal terms but still require supportive services and housing. Included in this group are youth, who, because they have reached 18 years, no longer can be served by certain child dependency and delinquency systems but nonetheless require assistance.

APPENDIX B: TALLY SHEET – UNSHELTERED



County of San Bernardino Office of Homeless Services



Point-in-Time Count Enumeration Form January 26 & 27, 2011 UNSHELTERED HOMELESS

Block Group #: ____ . ____

Team Code: _____

Other Location Info: _____

MALES		FEMALES	
YOUTH (under 18)	ADULTS (18 or older)	YOUTH (under 18)	ADULTS (18 or older)
Total:	Total:	Total:	Total:

COUNT EACH PERSON **ONLY ONCE**

Tally # of VEHICLES AND ENCAMPMENTS ONLY		Total
# of cars with sleeping occupants:		
# of Vans or RV's w/ electrical connections:		
# of Encampments:		

Notes:

Use reverse if needed.



APPENDIX C: TALLY SHEET - SHELTERED



Point-in-Time Count Enumeration Form
January 26, 2011
SHELTERED HOMELESS

***This form MUST be completed by 10 p.m. on Wednesday, January 26, 2011.
Once completed, please fax the completed form to (909) 873-4420.***

Shelter Name & Address or Zip Code: _____

Name of staff person filling out this form: _____

Contact Phone Number for night of January 26th: ()

MALES		FEMALES	
YOUTH (under 18)	ADULTS (18 or older)	YOUTH (under 18)	ADULTS (18 or older)
Total:	Total:	Total:	Total:

Please enter the number of vouchers issued on <u>January 26, 2011</u> :	

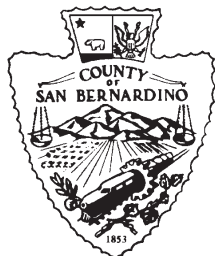
COUNT EACH PERSON ONLY ONCE

Notes:

Use reverse if needed



APPENDIX D: UNSHELTERED HOMELESS SURVEY INSTRUMENT



County of San Bernardino Office of Homeless Services

Point-in-Time Survey of UNSHELTERED INDIVIDUALS AND FAMILIES January 26 & 27, 2011



1. **Have you been staying in a room, an apartment, or a house?**

☐ Yes

If yes, is this place a...

☐ Room-Not Including a Motel ☐ An Apartment

☐ A House

1a. **Is that a permanent or a temporary situation?**

☐ Permanent [CONTINUE TO Q2]

☐ Temporary [SKIP TO Q3]

2. **That's all the questions I have right now. Thank you very much for your time.**
[Give person an incentive bag]

3. **Have you been staying in a...**

☐ Garage

☐ Abandoned Building

☐ Outdoor Encampment/streets (not in car)

☐ Car

☐ Van

☐ Truck or RV

☐ Emergency Shelter or Transitional Housing

☐ Motel

☐ Some Other Place - Please give details, if possible _____

☐ Don't Know

☐ Refused

4. **Have you been homeless 12 months or more?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

5. **How many episodes of homelessness have you had in the past 3 years?**

☐ Fewer than 4 episodes ☐ At least 4 episodes ☐ Don't Know ☐ Refused

6. **Do you live alone?**

☐ Yes, [SINGLE INDIVIDUAL SKIP TO Q7]

☐ No, Lives with: # Male(s) #Female(s)

☐ Spouse or partner _____

☐ Other family member(s) _____

☐ Child/ Children _____

☐ Friend(s) _____

☐ Parent or legal guardian _____

☐ Other _____

Please Describe: _____

7. **Are you a United States Veteran?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

7a. **If yes, were you activated, into active duty, as a member of the National Guard or as a Reservist?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

7b. **If yes, did you serve in:**

☐ WW II ☐ Iraq

☐ Korea ☐ Afghanistan

☐ Vietnam ☐ Other place in the global war on terror

☐ First Gulf War ☐ Don't Know

☐ Refused

8. **Have you ever been a victim of domestic or intimate partner violence?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

8a. **If yes, how long ago did you have this experience?**

☐ One year or less ☐ More than a year ☐ Don't know ☐ Refused

9. **Have you ever been a victim of violence by a parent guardian or relative?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 9a. **If yes, how long ago did you have this experience?**
☐ Less than a year ☐ More than a year ☐ Don't know ☐ Refused
10. **Do you have a physical disability?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
11. **Do you have a developmental disability?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 10-11a. **If yes, are either of these conditions long-standing and likely to last six months or longer?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 10-11b. **If yes, will these problems substantially impair your ability to live independently?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
12. **Do you have a drug or alcohol problem?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 12a. **If yes, is this problem long-standing and likely to last six months or longer?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 12b. **If yes, will this problem substantially impair your ability to live independently?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
13. **Do you currently use any of the following drugs?**
Cocaine, Crack, Heroin, PCP or LSD, Uppers/Speed, and/or Downers/Tranquilizers
☐ Yes ☐ No ☐ Don't Know ☐ Refused
14. **Do you feel that you have a mental health problem?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 14a. **If yes, is this problem long-standing and likely to last six months or longer?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 14b. **If yes, will this problem substantially impair your ability to live independently?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused

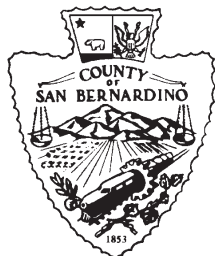
15. **Are you currently taking medications for mental health issues?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
16. **Have you been hospitalized for mental health issues?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
17. **Have you been diagnosed with AIDS or have you tested positive for HIV?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
18. **What is your age?** _____ ☐ Don't Know ☐ Refused
19. **Are you a runaway youth?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
20. **Are you currently employed?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
21. **Are you currently a student?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
22. **Finally, in order to make sure people don't take this survey more than once, can you please provide me with your date of birth and initials:**

Date of Birth: (Month)____ (Day)____ (Year)____
Initials: _____
23. **[For the survey taker to answer]**
Is the person you are interviewing:
☐ Male ☐ Female ☐ Don't Know

Thank you!

[Give person an incentive bag at completion]

APPENDIX E: SHELTERED HOMELESS SURVEY INSTRUMENT



County of San Bernardino Office of Homeless Services

2011 Point-in-Time Survey of SHELTERED INDIVIDUALS AND FAMILIES



TO BE COMPLETED BY PROVIDER STAFF:

Name of shelter: _____

Address or zip code of shelter location (Not business office):

Type of Shelter (CHECK ONLY ONE):

☐ Emergency ☐ Transitional ☐ Both emergency & transitional

1. **Have you been homeless 12 months or more?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

2. **How many episodes of homelessness have you had in the past 3 years?**

☐ Fewer than 4 episodes ☐ At least 4 episodes ☐ Don't Know ☐ Refused

3. **Do you live alone?**

☐ Yes, [SINGLE INDIVIDUAL SKIP TO Q4]

☐ No, Lives with: # Male(s) #Female(s)

☐ Spouse or partner _____

☐ Other family member(s) _____

☐ Child/ Children _____

☐ Friend(s) _____

☐ Parent or legal guardian _____

☐ Other _____

Please Describe: _____

4. **Are you a United States Veteran?**

☐ Yes ☐ No ☐ Don't know ☐ Refused

4a. **If yes, were you activated, into active duty, as a member of the National Guard or as a Reservist?**

☐ Yes ☐ No ☐ Don't know ☐ Refused

4b. **If yes, did you serve in:**

☐ WW II ☐ Iraq
☐ Korea ☐ Afghanistan
☐ Vietnam ☐ Other place in the global war on terror
☐ First Gulf War ☐ Don't Know
☐ Refused

5. **Have you ever been a victim of domestic or intimate partner violence?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

5a. **If yes, how long ago did you have this experience?**

☐ One year or less ☐ More than a year ☐ Don't know ☐ Refused

6. **Have you ever been a victim of violence by a parent guardian or relative?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

6a. **If yes, how long ago did you have this experience?**

☐ Less than a year ☐ More than a year ☐ Don't know ☐ Refused

7. **Do you have a physical disability?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

8. **Do you have a developmental disability?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

7-8a. **If yes, are either of these conditions long-standing and likely to last six months or longer?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

7-8b. **If yes, will these problems substantially impair your ability to live independently?**

☐ Yes ☐ No ☐ Don't Know ☐ Refused

9. **Do you have a drug or alcohol problem?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 9a. **If yes, is this problem long-standing and likely to last six months or longer?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 9b. **If yes, will this problem substantially impair your ability to live independently?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
10. **Do you currently use any of the following drugs?**
Cocaine, Crack, Heroin, PCP or LSD, Uppers/Speed, and/or Downers/Tranquilizers
☐ Yes ☐ No
11. **Do you feel that you have a mental health problem?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 11a. **If yes, is this problem long-standing and likely to last six months or longer?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
- 11b. **If yes, will this problem substantially impair your ability to live independently?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
12. **Are you currently taking medications for mental health issues?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
13. **Have you been hospitalized for mental health issues?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
14. **Have you been diagnosed with AIDS or have you tested positive for HIV?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
15. **What is your age?** _____ ☐ Don't Know ☐ Refused
16. **Are you a runaway youth?**
☐ Yes ☐ No ☐ Don't Know ☐ Refused
17. **Are you currently employed?**
☐ Yes ☐ No

18. **Are you currently a student?**

☐ Yes ☐ No

19. **Finally, in order to make sure people don't take this survey more than once, can you please provide me with your date of birth and initials:**

Date of Birth: (Month)____ (Day)____ (Year)____

Initials: ____

20. **[For the survey taker to answer]**

Is the person you are interviewing:

☐ Male ☐ Female ☐ Don't Know

Thank you!

[Give person an incentive bag at completion]

APPENDIX F: HOMELESS STUDENT COUNT

San Bernardino County
Superintendent of Schools
Children Deserve Success

Homeless Student Count 2009-2010

DISTRICT NAME	TOTAL
Adelanto Elementary	274
Alta Loma Elementary	225
Apple Valley Unified.....	198
Baker Valley Unified.....	160
Barstow Unified	101
Bear Valley Unified	265
Central Elementary	266
Chaffey Joint Union High	1,047
Chino Valley Unified	1,741
Colton Joint Unified.....	2,117
Cucamonga Elementary	125
Etiwanda Elementary.....	1,202
Fontana Unified	758
Helendale Elementary	35
Hesperia Unified	95
Lucerne Valley Unified	116
Morongo Unified.....	943
Mountain View Elementary.....	158
Mt. Baldy Joint Elementary	0
Needles Unified	44
Ontario-Montclair Elementary	3,775
Oro Grande Elementary.....	28
Redlands Unified	2,883
Rialto Unified	317
Rim of the World Unified	104
San Bernardino City Unified.....	2,519
San Bernardino County Office of Ed.....	594
Silver Valley Unified	21
Snowline Joint Unified.....	58
Trona Joint Unified	21
Upland Unified.....	702
Victor Elementary	584
Victor Valley Union High	884
Yucaipa-Calimesa Joint Unified	295
Total.....	22,658
PRIMARY NIGHT-TIME RESIDENCY	TOTAL
Shelters	1,438
Doubled-up housing due to economic hardship.....	19,533
Non-shelter (e.g., cars, parks, campgrounds, etc.).....	1,078
Hotels/Motels	609
GRADE LEVEL	TOTAL
Pre K – Kindergarten	2,649
1St – 6th Grade	11,196
7th – 12th Grade.....	8,813